

Mutual Aid Reimbursement System (MARS) Help Guide



MARS

Mutual Aid Reimbursement System

California Governor's Office of Emergency Services
Fire and Rescue Division

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Account Set Up

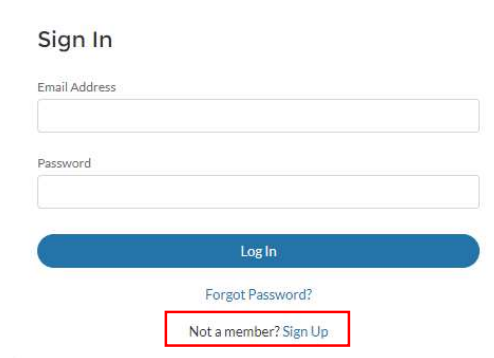
Local Government Fire Agency users can set up a MARS account to manage their reimbursement under the California Fire Assistance Agreement (CFAA).

Requesting Access

There are two levels of access for Local Government Fire Agency users. The Primary User level is intended for the Fire Chief or administrative staff that manage the rates, agreements, invoices, and other supporting documentation for reimbursements. These users are the individuals that submit the annual salary survey, follow up with reimbursement documentation after responses, review invoices, and track payments. The Secondary User level is intended for field personnel that are responders under the CFAA and submit F-42s and expenses in the field upon incident demobilization.

STEP 1: Visit the MARS webpage at <https://engage.caloes.ca.gov/s/login/>.

STEP 2: At the bottom of the sign in box, select Sign Up.



Sign In

Email Address

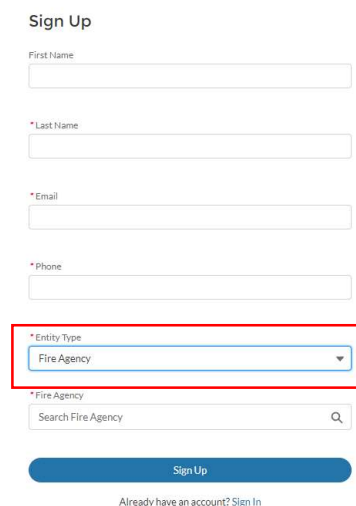
Password

Log In

Forgot Password?

Not a member? Sign Up

STEP 3: Complete the required fields and make sure you are selecting Fire Agency in the Entity Type dropdown.



Sign Up

First Name

* Last Name

* Email

* Phone

* Entity Type

Fire Agency

* Fire Agency

Search Fire Agency

Sign Up

Already have an account? Sign In

STEP 4: The system will send you an email to verify your account. Select the link provided within the email to set up a password.

From: No Reply - Cal OES <noreply@caloes.ca.gov>
Date: Fri, Oct 15, 2021 at 10:54 AM
Subject: Sandbox: Validate your registration
To:



Hi,

Please validate your portal

registration by clicking on below link:

<https://qa-caloes.cs3.force.com/s/user-validation?token=NuJst211r8pRMvWP10UqyEXfEdEp3D>

Sincerely,
California Governor's Office of Emergency Services



Enter Password

* Enter Password

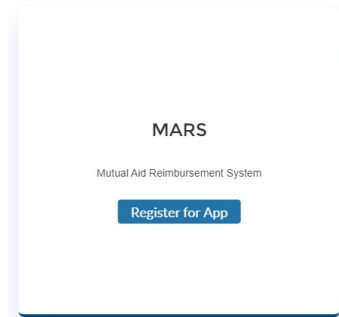
.....

* Confirm Password

.....

Submit

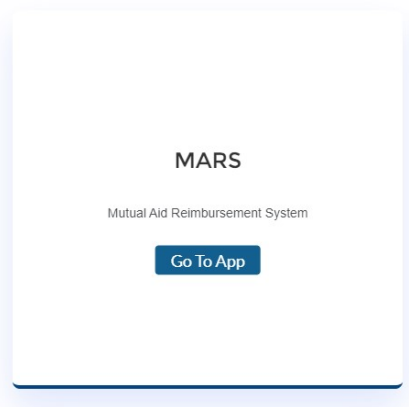
STEP 5: Now that you have access to the platform you will need to request access to the application. Hover over the MARS logo and select Register for App.



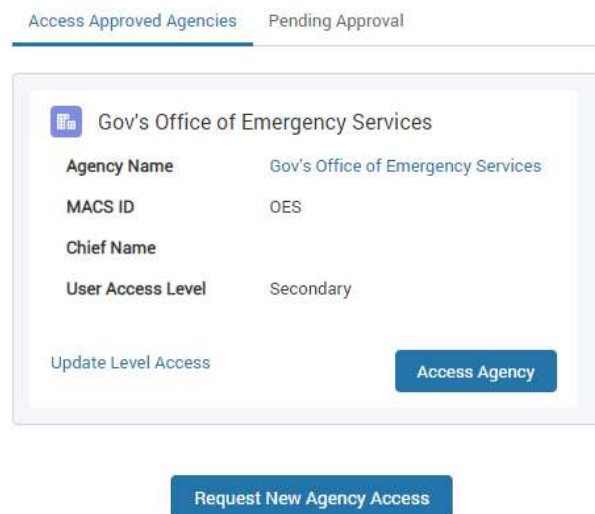
STEP 6: Once you have determined the access level, make the appropriate selection to Request Primary Access or Request Secondary Access.

Request for MARS App	
FirstName	
LastName	
Email	
Phone	
Entity	Fire Agency
Organization	Gov's Office of Emergency Services
Primary Access	Secondary Access
Primary Access is for personnel responsible for the agency's reimbursement including submittal of rates.	Secondary Access is for responding personnel that submit F-42s and travel only.
Request Primary Access	Request Secondary Access

STEP 7: Once your request for access has been reviewed and approved by your agency's primary users or Cal OES, you will be able to select Go To App when you hover over the MARS logo.



STEP 8: On the welcome page you can access approved agencies by selecting Access Agency, view access requests that are pending approval, or request access to additional agencies by selecting Request New Agency Access.

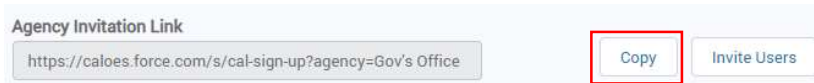


Agency Information

Once you access your agency, you will be taken to the Agency Information screen. The Agency Information screen contains identifying information for Local Government Fire Agencies. This is where users can update contact information, manage addresses, and provide identification numbers for reimbursement. **Primary Users have permissions to edit this information, Secondary Users can only view their agency's data.**

STEP 1: The Agency Invitation Link allows users to invite people to create an account for their agency.

Option 1: The Copy button will copy the website URL for the user to paste into an email to send a personalized invite.

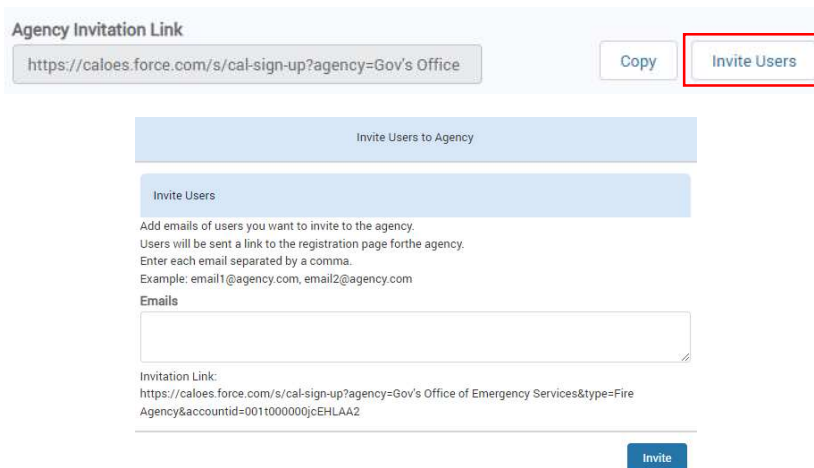


Agency Invitation Link

<https://caloes.force.com/s/cal-sign-up?agency=Gov's Office>

Copy Invite Users

Option 2: The Invite Users button will open a pop up, asking the user to enter one or more email addresses, to send a system generated email invite.



Agency Invitation Link

<https://caloes.force.com/s/cal-sign-up?agency=Gov's Office>

Copy Invite Users

Invite Users to Agency

Invite Users

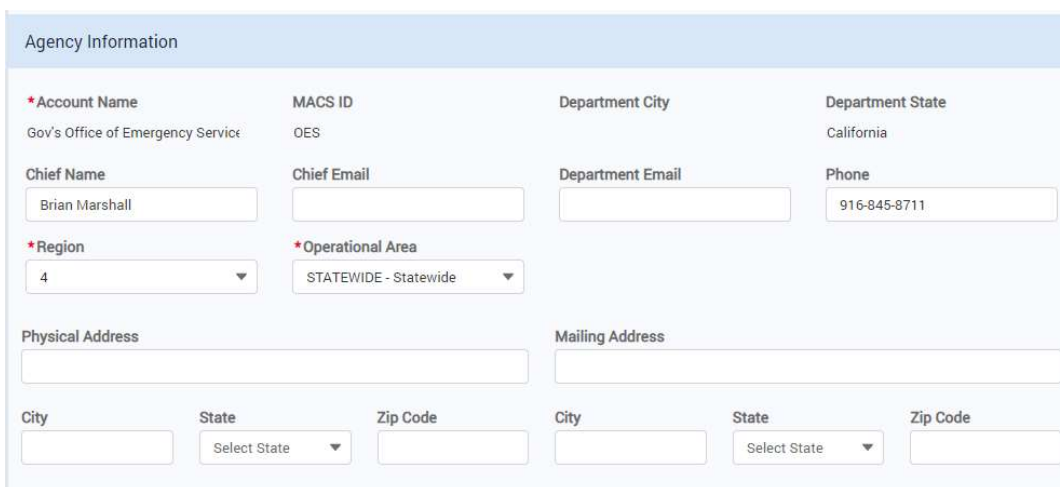
Add emails of users you want to invite to the agency.
Users will be sent a link to the registration page for the agency.
Enter each email separated by a comma.
Example: email1@agency.com, email2@agency.com

Emails

Invitation Link:
<https://caloes.force.com/s/cal-sign-up?agency=Gov's Office of Emergency Services&type=Fire Agency&accountid=001t000000jcEHLAA2>

Invite

STEP 2: The Agency Information has been migrated into MARS from information that was collected from prior salary survey submissions. Please review each field and update any inaccurate data.



Agency Information

*Account Name	MACS ID	Department City	Department State
Gov's Office of Emergency Service	OES		California
Chief Name	Chief Email	Department Email	Phone
Brian Marshall			916-845-8711
*Region	*Operational Area		
4	STATEWIDE - Statewide		
Physical Address		Mailing Address	
City	State	City	State
	Select State		Select State
Zip Code		Zip Code	

STEP 3: The agency categories reflect information from prior salary survey submissions. Please review each field and update any inaccurate selections.

Please select all appropriate categories that apply to your agency

Federally Recognized Tribe

☐ Yes ☒ No

Federal Fire Department

☐ Yes ☒ No

Department of Defense

☐ Yes ☒ No

Volunteer

☐ Yes ☒ No

Paid

☒ Yes ☐ No

Combination

☐ Yes ☒ No

Other

☐ Yes ☒ No

Please select the appropriate responses for your agency

Active Agency

☒ Yes ☐ No

Responder

☒ Yes ☐ No

STEP 4: The Agency Identification Numbers are from prior salary survey submissions. Please review each field and update any inaccurate selections.

Agency Identification Numbers

Tax Payer ID or FEIN

00-00000000

DUNS Number

000000000000

FI\$Cal Supplier ID

000000000000

FI\$Cal Address ID

1

STEP 5: Ensure that you select Save at the bottom of the page.

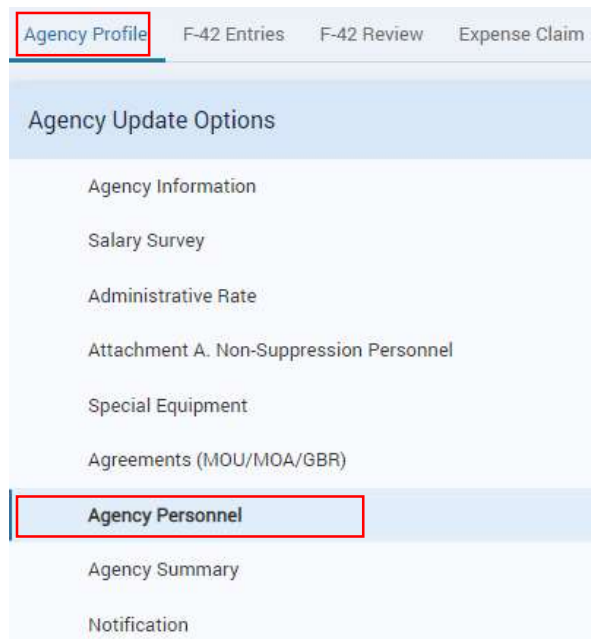
Save

Agency Personnel

The Agency Personnel screen contains a list of users that have access to the Local Government Fire Agency you are logged in under. This is where Primary Users can manage current users and approve pending requests for access to their agency.

Primary Users have permissions to view and manage this information, Secondary Users do not have access to this screen.

STEP 1: Select the Agency Profile tab on the top navigation bar, then select Agency Personnel in the left-hand navigation bar.



STEP 2: Any user requests that are pending for your agency can be viewed in the top table under Agency Personnel Pending Approval. Primary Users can view information about users requesting access and approve or reject requests.

Agency Personnel Pending Approval							
First Name	Last Name	Email	Phone	Access Level Requested	Action		
1				Primary	Approve	Reject	

STEP 3: Any users that have access to your agency can be viewed in the bottom table under Agency Personnel. Primary Users can view information about the existing users, manage the level of access, or remove access for users.

Agency Personnel							
First Name	Last Name	Email	Phone	Access Level	IsActive	Action	
1				Primary	true	Update Access Level	Deactivate


Agency Summary

The Agency Summary screen allows a user to select a date and view a comprehensive summary of all rates and agreements that were in place on the date selected for that Local Government Fire Agency. **Primary Users have permissions to view this information, Secondary Users do not have access to this screen.**

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Agency Summary screen at the bottom of the left-hand navigation bar.



STEP 2: Select a date to view all rate and agreement information that is on file that day. The summary can be printed from the bottom of the page.

*Select a Date
Jan 1, 2022 

[Retrieve](#)

Administrative Rate: 0.10000

Salary Survey

Classification Title	Salary Rate (ST)	Overtime	Portal-to-Portal
Chief	\$26.95	No	No
Deputy Chief	\$26.95	No	No
Division Chief	\$26.95	No	No
Assistant Chief	\$26.95	No	No
Battalion Chief	\$26.95	Yes	No
Co. Officer/Capt./Lt.	\$22.30	Yes	No
App. Officer/Eng	\$22.30	Yes	No
Firefighter/FF-PMedic	\$22.30	Yes	No

Notifications

The Notifications tab allows primary users to enable or disable email notifications for a variety of events where action is required by the Local Government Fire Agency. **Primary Users have permissions to manage notifications, Secondary Users do not have access to this screen and do not receive notifications.**

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Notifications screen using the left-hand side navigation bar.



STEP 2: Check or uncheck the checkbox next to the notification you would like to enable or disable and select the Update button.

A screenshot of a web form titled 'Manage Notification Settings'. The title is centered at the top in a large, bold, dark blue font. Below the title, there are three notification settings, each consisting of a checkbox and a text description: 1. A checkbox followed by 'Send notification when F-42 has been returned for review and requires action'. 2. A checkbox followed by 'Send notification when Expense Claim has been returned for review and requires action'. 3. A checkbox followed by 'Send notification when Invoice is ready for review and requires action'. All three checkboxes are currently unchecked. In the bottom right corner of the form, there is a blue button with the word 'Update' in white text, which is highlighted with a red rectangular box.

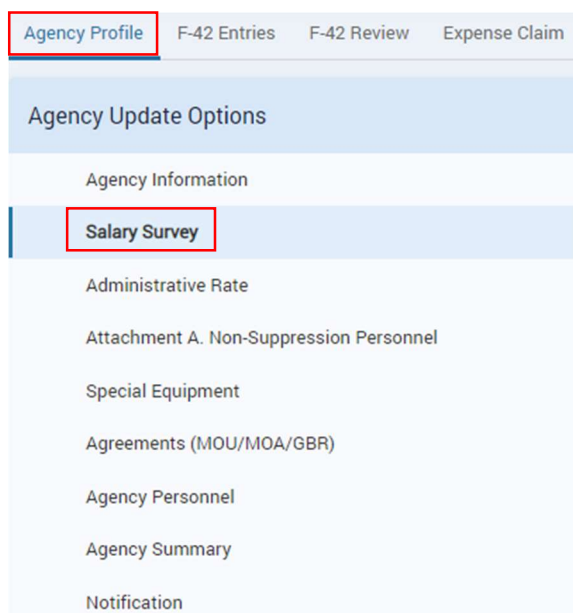
Rate Submissions

Primary Users have permission to view and submit rate information for personnel and other resources within their agency that will be utilized for the calculation of CFAA reimbursement invoices.

Salary Survey

The Salary Survey screen includes straight time salary rate input fields for Local Government Fire Agency users to submit salary rates for the eight traditional classification titles. Responding agencies are required to submit an updated form on an annual basis. There is also a history table that allows users to view previous submissions.

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Salary Survey screen on the left-hand navigation bar.



STEP 2: Complete the “Are you Utilizing the Base Rate?” column for each classification title. If your agency is accepting the base rate for a position, select yes and continue to Step 2. If your agency is submitting a calculated salary rate, select no and skip to Step 3.

Classification Title	① Base Rates	② Are you Utilizing the Base Rate?
Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No
Deputy Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No
Division Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No
Assistant Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No
Battalion Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No
Co. Officer/Capt./Lt.	\$22.58	<input type="radio"/> Yes <input type="radio"/> No
App. Officer/Eng	\$22.58	<input type="radio"/> Yes <input type="radio"/> No
Firefighter/FF-PMedic	\$22.58	<input type="radio"/> Yes <input type="radio"/> No

STEP 3: Complete the “Are you adding WC/UI?” column for each classification title. If your agency is accepting the base rate and not adding WC/UI, select no and skip to Step 4. If your agency is accepting the base rate and adding WC/UI, select yes and continue to Step 3.

Classification Title	① Base Rates	② Are you Utilizing the Base Rate?	Are you adding WC/UI?
Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Deputy Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Division Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Assistant Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Battalion Chief	\$27.14	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Co. Officer/Capt./Lt.	\$22.58	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
App. Officer/Eng	\$22.58	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Firefighter/FF-PMedic	\$22.58	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

STEP 4: Complete the “Salary Rate (ST)” column with the rates you determined by following the calculation outlined in the Salary Survey Instructions. The Overtime and Portal-to-Portal checkboxes are linked to your agreement screen, please refer to that screen to manage compensation methods.

Salary Rate (ST)	Overtime	Portal-to-Portal
<input type="text"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="text"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="text"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="text"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

STEP 5: The effective date will default to the date you are submitting the survey. If you wish to future date your submission, please select the date you would like the rates to go into effect.

*** Effective Date for the Rates Being Submitted**

Jan 1, 2022 

STEP 6: Review the verbiage to the right of the signature block and sign your salary survey submission.

* Please sign here

NOTE: These rates are not effective until the date they are received by Cal OES.

What is reported on this form constitutes direct salary costs for employees.

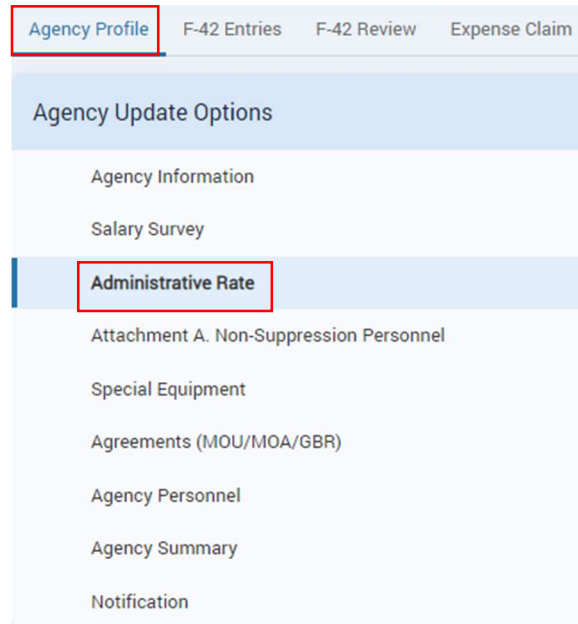
As an authorized representative of my agency/dept., I certify to the best of my knowledge and belief, and under penalty of perjury that this information is correct. Furthermore, my signature represents acceptance by my agency/dept., as a cooperator, to comply with the authorities, terms and conditions of the CFAA. I also agree to comply with all cooperator agency internal accounting and expense reimbursement standards.

STEP 7: Once all fields have been completed and your salary survey is signed, select submit and your entry will appear in the history table at the bottom of the page.

Submit

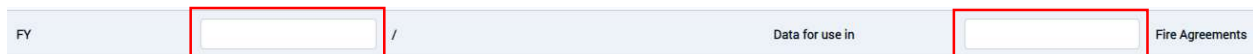
Administrative Rate

The Administrative Rate screen includes indirect and direct cost input fields for Local Government Fire Agency users to submit fiscal year data to calculate the administrative rate that will be applied to reimbursement invoices. The administrative rate calculation is optional for responding agencies and if not completed, the de minimis rate of 10% will be applied to reimbursement invoices. There is also a history table that allows users to view previous submissions. **STEP 1:** Select the Agency Profile tab on the top navigation bar and go to the Administrative Rate screen on the left-hand navigation bar.



The screenshot shows a web application interface. At the top, there is a horizontal navigation bar with four tabs: 'Agency Profile', 'F-42 Entries', 'F-42 Review', and 'Expense Claim'. The 'Agency Profile' tab is selected and highlighted with a red rectangle. Below this bar is a vertical navigation menu titled 'Agency Update Options'. This menu contains several items: 'Agency Information', 'Salary Survey', 'Administrative Rate', 'Attachment A. Non-Suppression Personnel', 'Special Equipment', 'Agreements (MOU/MOA/GBR)', 'Agency Personnel', 'Agency Summary', and 'Notification'. The 'Administrative Rate' item is highlighted with a blue background and a red rectangle.

STEP 2: Complete the fiscal year and calendar year fields at the top of the form. Please note your administrative rate calculation should be based on prior or prior-prior fiscal year actual costs.



The screenshot shows the top of a form. On the left, there is a label 'FY' followed by a text input field, which is highlighted with a red rectangle. To the right of this field is a forward slash '/'. Further right is the label 'Data for use in' followed by another text input field, also highlighted with a red rectangle. On the far right of this section is the label 'Fire Agreements'.

STEP 3: Complete the indirect and direct costs derived from data for the fiscal year entered above following the Instructions for Completing the Administrative Rate Calculations.

Program	Indirect	Direct
Emergency Medical Services	<input type="text"/>	<input type="text"/>
General Administration	<input type="text"/>	
Information Technology	<input type="text"/>	
Logistics/Procurement/Supply/Minor Fire Equipment	<input type="text"/>	
Public Information Office	<input type="text"/>	
Telecommunications	<input type="text"/>	
Arson Investigation		<input type="text"/>

STEP 4: The effective date will default to the date you are submitting the form. If you wish to future date your submission, please select the date you would like the rate to go into effect. Please note the administrative rate expires on a fiscal year basis and an updated calculation is required by July 1st of each year.

*** Effective Date for the Rates Being Submitted**

Jul 1, 2022 

STEP 5: Review the verbiage to the right of the signature block and sign your administrative rate submission.

*** Please sign here**

As an authorized representative of my agency/dept., I certify to the best of my knowledge and belief, and under penalty of perjury that the administrative rate is correct and is established in accordance with the negotiated California Fire Assistance Agreement using the Instructions for Completing Administrative Rate Calculations and ICRP Definitions. Furthermore, my signature represents acceptance by my agency/dept., as a cooperator, to comply with the authorities, terms and conditions of the CFAA.

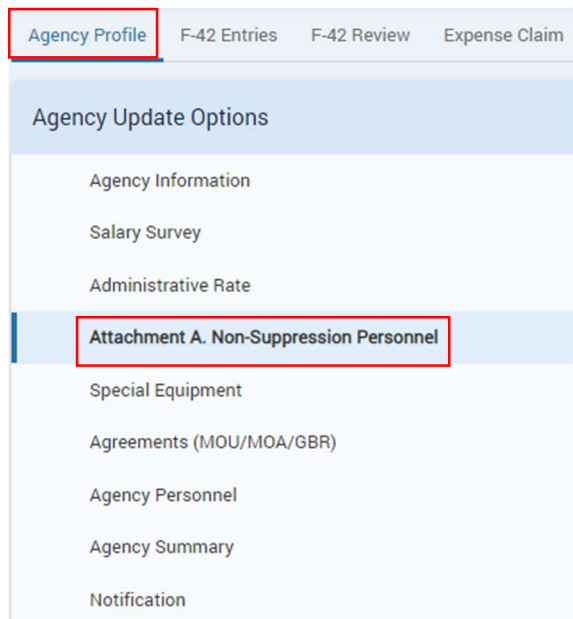
STEP 6: Once all fields have been completed and your administrative rate is signed, select submit and your entry will appear in the history table at the bottom of the page.

Submit

Attachment A Non-Suppression Personnel

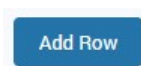
The Attachment A Non-Suppression Personnel screen includes straight time salary rate input fields for Local Government Fire Agency users to submit salary rates for classification titles that are not listed on the Salary Survey screen. Responding agencies are required to submit an updated form on an annual basis. There is also a history table that allows users to view previous submissions.

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Attachment A Non-Suppression Personnel screen on the left-hand navigation bar.



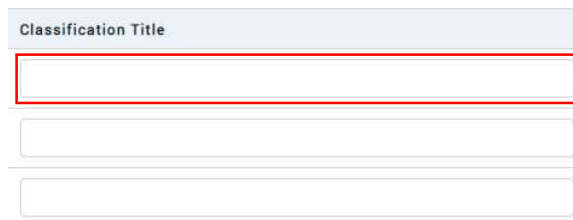
The screenshot shows a navigation interface. At the top, there are four tabs: 'Agency Profile', 'F-42 Entries', 'F-42 Review', and 'Expense Claim'. The 'Agency Profile' tab is selected and highlighted with a red box. Below the tabs is a section titled 'Agency Update Options'. This section contains a list of menu items: 'Agency Information', 'Salary Survey', 'Administrative Rate', 'Attachment A. Non-Suppression Personnel', 'Special Equipment', 'Agreements (MOU/MOA/GBR)', 'Agency Personnel', 'Agency Summary', and 'Notification'. The 'Attachment A. Non-Suppression Personnel' item is highlighted with a red box and a blue vertical bar to its left.

STEP 2: Select the Add Row button on the right-hand side of the screen to add rows for each of the Non-Suppression classification titles you wish to submit.



A blue rectangular button with the text 'Add Row' in white.

STEP 3: Complete the "Classification Title" column listing each position within your agency that responds under the CFAA but was not included on the traditional salary survey form.



The screenshot shows a form with a header 'Classification Title' in a light blue box. Below the header are three empty text input fields, each outlined with a red border. The first field is the largest, and the second and third are smaller and stacked vertically.

STEP 4: Complete the “Salary Rate (ST)” column with the rates you determined by following the calculation outlined in the Salary Survey Instructions. The Portal-to-Portal checkboxes are linked to your agreement screen, please refer to that screen to manage compensation methods.

Salary Rate (ST)	Portal-To-Portal
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>

STEP 5: The effective date will default to the date you are completing the survey. If you wish to future date your submission, please select the date you would like the rates to go into effect.

* Effective Date for the Rates Being Submitted

Jan 1, 2022 

STEP 6: Review the verbiage to the right of the signature block and sign your Attachment A submission.

<p>* Please sign here</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>	<p>NOTE: These rates are not effective until the date they are received by Cal OES.</p> <p>The rates reported on this form constitutes direct salary costs for employees and are not contingent upon the CFAA for reimbursement.</p> <p><small>As an authorized representative of my agency/dept., I certify to the best of my knowledge and belief, and under penalty of perjury that this information is correct. Furthermore, my signature represents acceptance by my agency/dept., as a cooperator, to comply with the authorities, terms and conditions of the CFAA. I also agree to comply with all cooperator agency internal accounting and expense reimbursement standards.</small></p>
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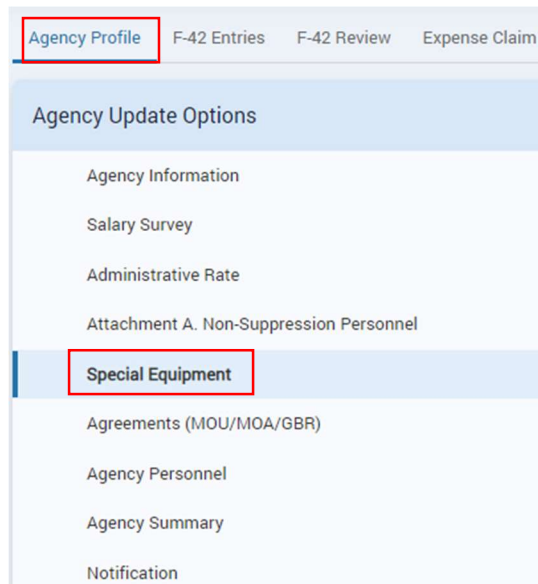
STEP 7: Once all fields have been completed and your Attachment A is signed, select submit and your entry will appear in the history table at the bottom of the page.

Submit

Special Equipment

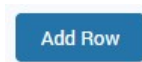
The Special Equipment screen includes hourly rate input fields for Local Government Fire Agency users to submit usage rates for equipment that is not outlined in the CFAA Rate Letter. Agencies can select a FEMA cost code or enter their own hourly rate for equipment that is not included in the FEMA list. There is also a history table that allows users to view previous submissions.

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Special Equipment screen on the left-hand navigation bar.



The screenshot shows a web application interface. At the top, there is a navigation bar with four tabs: 'Agency Profile', 'F-42 Entries', 'F-42 Review', and 'Expense Claim'. The 'Agency Profile' tab is selected and highlighted with a red rectangle. Below this bar is a section titled 'Agency Update Options'. This section contains a list of menu items: 'Agency Information', 'Salary Survey', 'Administrative Rate', 'Attachment A. Non-Suppression Personnel', 'Special Equipment', 'Agreements (MOU/MOA/GBR)', 'Agency Personnel', 'Agency Summary', and 'Notification'. The 'Special Equipment' item is highlighted with a red rectangle.

STEP 2: Select the Add Row button on the right-hand side of the screen to add rows for each piece of the Special Equipment you wish to submit.



A blue rectangular button with the text 'Add Row' in white.

STEP 3: Complete the "Special Equipment Type" column listing each piece of equipment within your agency that responds under the CFAA but is not outlined in the CFAA Rate Letter.



The screenshot shows a table with a header row labeled 'SPECIAL EQUIPMENT TYPE'. Below the header, there are three empty text input fields, each outlined with a red rectangle.

STEP 4: For each piece of equipment your entered, complete either the “FEMA Code” column if your piece of equipment is listed in the FEMA Schedule of Equipment or complete the “Equipment Rate” column with rates specific to your agency calculated in accordance with Exhibit F of the CFAA.

FEMA CODE	EQUIPMENT RATE
<input type="text" value="SELECT/CHANGE FEMA Code"/> <input type="button" value="Q"/>	<input type="text"/>
<input type="text" value="SELECT/CHANGE FEMA Code"/> <input type="button" value="Q"/>	<input type="text"/>
<input type="text" value="SELECT/CHANGE FEMA Code"/> <input type="button" value="Q"/>	<input type="text"/>

STEP 5: Complete the “Description” column for each piece of equipment listed.

DESCRIPTION
<input type="text"/>
<input type="text"/>
<input type="text"/>

STEP 6: The effective date will default to the date you are completing the survey. If you wish to future date your submission, please select the date you would like the rates to go into effect.

* Effective Date for the Rates Being Submitted

STEP 7: Review the verbiage to the right of the signature block and sign your Special Equipment submission.

* Please sign here

NOTE: These rates are not effective until the date they are received by Cal OES.

The rates reported on this form constitutes direct salary costs for employees and are not contingent upon the CFAA for reimbursement.

As an authorized representative of my agency/dept., I certify to the best of my knowledge and belief, and under penalty of perjury that this information is correct. Furthermore, my signature represents acceptance by my agency/dept., as a cooperator, to comply with the authorities, terms and conditions of the CFAA. I also agree to comply with all cooperator agency internal accounting and expense reimbursement standards.

STEP 8: Once all fields have been completed and your Special Equipment is signed, select submit and your entry will appear in the history table at the bottom of the page.

Agreement Submissions

Primary Users have permission to view and submit Memorandum of Understanding, Memorandum of Agreement or Governing Body Resolutions to request portal-to-portal or overtime for personnel above the Battalion Chief rank within their agency that will be utilized for the calculation of CFAA reimbursement invoices.

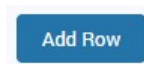
MOU/MOA/GBR

The Agreements (MOU/MOA/GBR) screen includes classification title input fields and portal-to-portal and overtime checkboxes for Local Government Fire Agency users to submit agreements for review. Responding agencies are required to have an approved agreement on file prior to dispatch to receive the requested compensation. There is also a history table that allows users to view previous submissions.

STEP 1: Select the Agency Profile tab on the top navigation bar and go to the Agreements (MOU/MOA/GBR) screen on the left-hand navigation bar.



STEP 2: Select the Add Row button on the right-hand side of the screen to add rows for each of the classification titles you wish to submit.



STEP 3: Complete the “Classification Title” column listing each position within your agency that are covered under the agreement you are submitting for review. Please note that titles need to be listed on your Salary Survey or Attachment A before they can be found on the Agreement screen.

The screenshot shows a section titled "Classification Title" with three identical search input fields. Each field contains the placeholder text "Enter / Search Title (3 or more characters)" and a magnifying glass icon on the right. The top input field is highlighted with a red rectangular border.

STEP 4: Complete the “Overtime” and “Portal-to-Portal” checkboxes indicating the compensation method requested.

The screenshot shows a table with two columns: "Overtime" and "Portal-To-Portal". There are three rows of checkboxes. In the third row, the checkbox under the "Overtime" column is checked and highlighted with a red rectangular border.

Overtime	Portal-To-Portal
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

STEP 5: The start date will default to the date you are completing the survey. If you wish to future date your submission, please select the date you would like the agreement to go into effect. If the agreement has an end date, enter the end date.

The screenshot shows two date input fields. The "Start Date" field is labeled with a red asterisk and contains the text "Jul 1, 2022". The "End Date" field is empty. Both fields have a calendar icon on the right side.

STEP 6: Upload a complete copy of the agreement you are submitting for review and select an attachment type from the dropdown.

The screenshot shows two sections. The "Attach File" section has a button labeled "Upload Files" with a cloud icon and the text "Or drop files". The "Attachment Type" section has a dropdown menu with the text "Select Attachment Type" and a downward arrow.

STEP 7: Once all fields have been completed and your agreement is uploaded, select submit and your entry will appear in the history table at the bottom of the page.

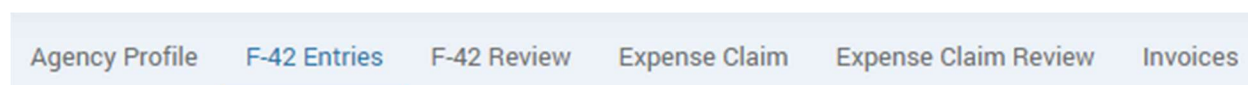
The screenshot shows a blue button with the text "Submit" in white.

F-42 Submissions

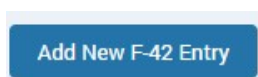
All users can enter electronic F-42s for resources that are ordered under the CFAA. Primary Users have permission to view submitted F-42s and communicate with Cal OES to provide clarification or missing information for F-42s to help them progress in the reimbursement process.

F-42s Entries

The F-42s Entries screen allows Local Government Fire Agency users to complete, save and submit F-42s for reimbursement processing.



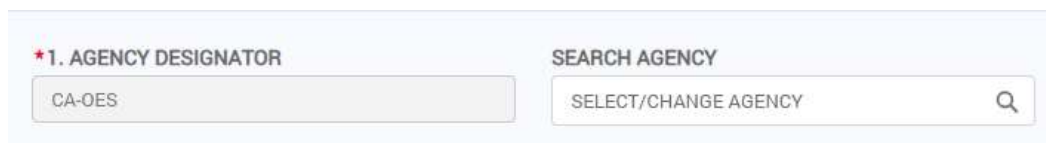
STEP 1: Select the Add New F-42 Entry button on the bottom right-hand corner of the screen to open a new form.



STEP 2: Navigate to 1-4. Agency/Incident on the left-hand navigation bar.



STEP 3: Verify the Agency Designator in box 1 is correct, or select a different agency by using the Search Agency field.

A form section with two input fields. The first field is labeled '*1. AGENCY DESIGNATOR' and contains the text 'CA-OES'. The second field is labeled 'SEARCH AGENCY' and contains the text 'SELECT/CHANGE AGENCY' with a magnifying glass icon on the right.

STEP 4: Select an option from the Resource Type dropdown in box 2. If Strike Team/Task Force is selected, an additional field will open to input a Strike Team/Task Force number.



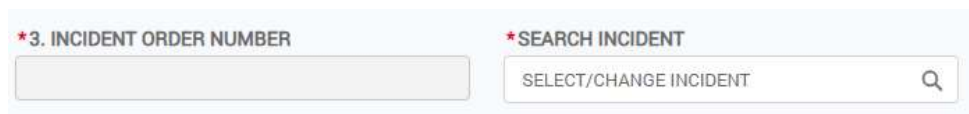
*2. RESOURCE TYPE

STRIKE TEAM/TASK FORCE

*STRIKE TEAM/TASK FORCE NUMBER

OES-1800-TF

STEP 5: Use the Search Incident field to complete the Incident Order Number in box 3. Users can search using part or all of the incident name or incident order number.



*3. INCIDENT ORDER NUMBER

*SEARCH INCIDENT

SELECT/CHANGE INCIDENT

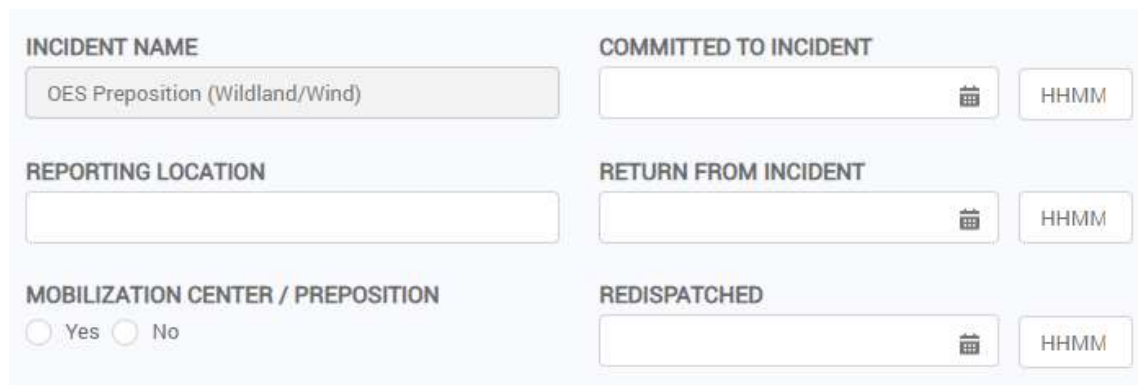
STEP 6: The Incident Request Number field should have a prefix based on the selection in box 2. Enter the assigned request number after the prefix in box 4. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.



*4. INCIDENT REQUEST NUMBER

E-

STEP 7: Verify the Incident Name in box 5 is correct. If it is not, navigate back to the Search Incident field for box 3 to select a different incident. Enter the Reporting Location, select yes or no for Mobilization Center/Preposition, enter the Committed to Incident Date and Time, and enter the Return from Incident Date and Time or the Redispached Date and Time. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.



INCIDENT NAME

OES Preposition (Wildland/Wind)

COMMITTED TO INCIDENT

HHMM

REPORTING LOCATION

RETURN FROM INCIDENT

HHMM

MOBILIZATION CENTER / PREPOSITION

☐ Yes ☐ No

REDISPACHED

HHMM

STEP 8: If you were dispatched from a prior incident, complete box 6, otherwise, continue to box 7. Use the Search Old Incident field to complete the Old Incident Name and Old Incident Order Number. Enter the End Date. The Old Incident Request Number field should have a prefix based on the selection in box 2. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

SEARCH OLD INCIDENT

SELECT/CHANGE INCIDENT

Q

OLD INCIDENT NAME

END DATE

OLD INCIDENT ORDER NUMBER

OLD INCIDENT REQUEST NUMBER

A-12345678

Clear

STEP 9: If you are being dispatched to a new incident, complete box 7, otherwise, continue to box 8. Use the Search New Incident field to complete the New Incident Name and New Incident Order Number. Enter the Start Date. The New Incident Request Number field should have a prefix based on the selection in box 2. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

SEARCH NEW INCIDENT

SELECT/CHANGE INCIDENT

Q

NEW INCIDENT NAME

START DATE

NEW INCIDENT ORDER NUMBER

NEW INCIDENT REQUEST NUMBER

12345678

Clear

STEP 10: If you are an overhead resource, complete box 8, otherwise, continue to box 9. Select the appropriate check box. If Overhead is selected, additional fields will open to allow the user to search for their ICS position or enter an Other Title if you are unable to find the appropriate match in the search. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

OVERHEAD INFORMATION
☐ STEN ☐ STEN(T)
☐ TFLD ☐ TFLD(T)
☒ Overhead Position

Clear

***SEARCH ICS POSITION**

SELECT/CHANGE ICS TITLE

Q

ICS TITLE CODE

ICS TITLE

***OTHER TITLE**

STEP 11: If you have a support vehicle, complete boxes 9 and/or 10, otherwise, continue to box 11. Select the appropriate vehicle and additional fields will open depending upon what is required for each vehicle type. For an agency owned vehicle or CDF/OES owned vehicle, enter the License Number and select the vehicle type. For a privately owned vehicle, enter the license number and the beginning and ending odometer readings. For a rental vehicle, a separate expense claim form will need to be completed with a copy of the rental receipt attached. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

VEHICLE OWNERSHIP
☒ Agency ☐ POV ☐ Rental ☐ CDF/OES

Clear

LICENSE NUMBER

VEHICLE TYPE
☐ Sedan ☐ SUV ☐ Van ☐ Pick-Up (1/2 Ton) ☐ Other (3/4 Ton & Above)

Clear

STEP 12: If you have a piece of equipment, complete box 11 otherwise continue to box 12. Select the appropriate equipment type from the Apparatus dropdown. If the equipment is an engine or a water tender, select the appropriate type. If the equipment is more specialized, select the appropriate equipment using the Search FEMA Codes or Search Special Equipment fields. Enter the Unit Number, the License Number, and select yes or no for CDF/OES Vehicle. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

APPARATUS <div>Select apparatus ▼</div>		TYPE <div><input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> WT-1 <input type="radio"/> WT-2</div> <div>Clear</div>							
UNIT NUMBER <div>AB-12345</div>	LICENSE NUMBER or VIN <div></div>	CDF/OES VEHICLE <div><input type="radio"/> Yes <input type="radio"/> No</div>							
SEARCH FEMA CODES <div>SELECT/CHANGE FEMA CODE 🔍</div> <div>Add</div>		SEARCH SPECIAL EQUIPMENT <div>SELECT/CHANGE SPECIAL EQUIPMENT 🔍</div> <div>Add</div>							
<table border="1"><thead><tr><th>FEMA Code</th><th>Description</th><th>Action</th></tr></thead><tbody></tbody></table>		FEMA Code	Description	Action	<table border="1"><thead><tr><th>Equipment Type</th><th>Description</th><th>Action</th></tr></thead><tbody></tbody></table>		Equipment Type	Description	Action
FEMA Code	Description	Action							
Equipment Type	Description	Action							

STEP 13: Enter the Number of Personnel on Apparatus and select yes or no for Documentation Only. If yes is selected, it indicates that the F-42 is not reimbursable and will not be generated into an invoice.

* NUMBER OF PERSONNEL ON APPARATUS <div></div>	DOCUMENTATION ONLY <div><input type="radio"/> Yes <input type="radio"/> No</div>
--	--

STEP 14: If there was an approved crew rotation, select the Add Approved Personnel Rotation button, otherwise, continue to step 15. If selected, a pop up will appear to add the dates, times, and support vehicle used for the rotation. Enter data in the fields in the pop up and select add.

Add Approved Personnel Rotation

Crew Rotation

Incoming Crew No.

2

Outgoing Crew No.

1

Incoming Crew Start Date

Outgoing Crew End Date

Incoming Crew Start Time

HHMM

Outgoing Crew End Time

HHMM

9.SUPPORT VEHICLE INFORMATION

VEHICLE OWNERSHIP

☒ Agency

☐ POV

☐ Rental

☐ CDF/OES

LICENSE NUMBER

VEHICLE TYPE

☐ Sedan

☐ SUV

☐ Van

☐ Pick-Up (1/2 Ton)

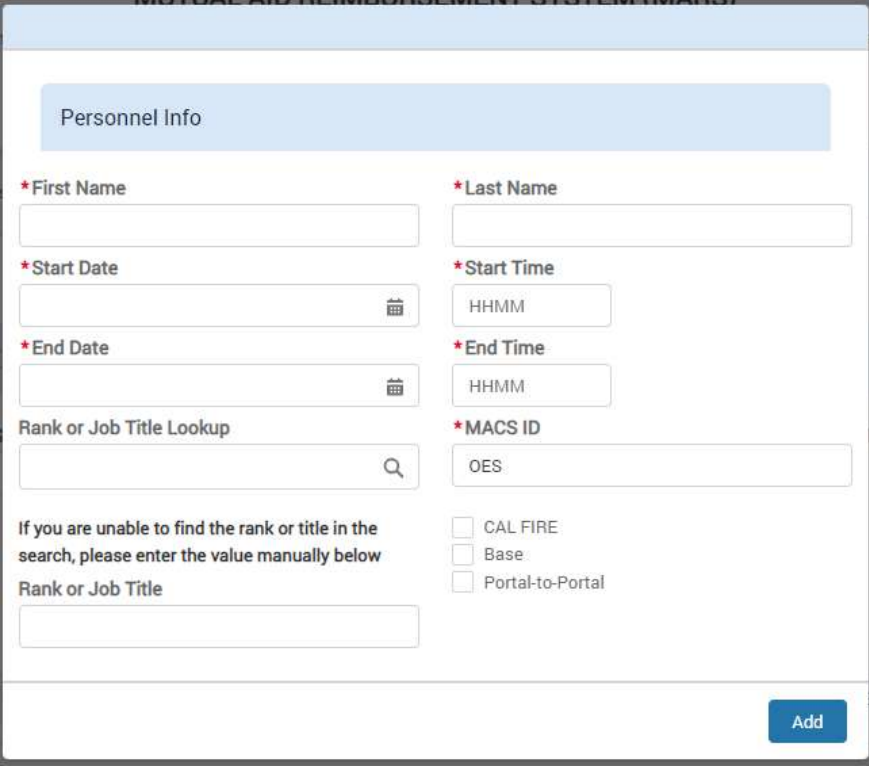
☐ Other (3/4 Ton & Above)

Cancel

Add

Page 26 of 36

STEP 15: Select the Add Personnel button and a pop up will appear to add a name and title. The MACS ID will fill based upon box 1 and the Start Date and Time and End Date and Time will be filled based upon box 5, however, the fields can be changed for each individual. Enter data in the fields in the pop up and select add. Repeat to add additional personnel.

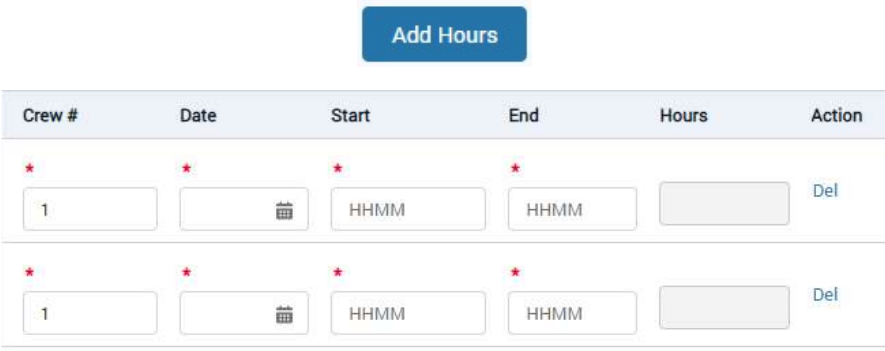


The form is titled "Personnel Info" and contains the following fields:

- *First Name: Text input field
- *Last Name: Text input field
- *Start Date: Date picker (calendar icon)
- *Start Time: HHMM time input field
- *End Date: Date picker (calendar icon)
- *End Time: HHMM time input field
- Rank or Job Title Lookup: Text input field with a search icon
- *MACS ID: Text input field (pre-filled with "OES")
- If you are unable to find the rank or title in the search, please enter the value manually below:
 - Rank or Job Title: Text input field
 - ☐ CAL FIRE
 - ☐ Base
 - ☐ Portal-to-Portal

An "Add" button is located at the bottom right of the form.

STEP 16: If the personnel do not have a portal-to-portal agreement on file, enter actual hours in box 13, otherwise, continue to box 14. Select the Add Hours button to add a line for each calendar day and enter the hours spent working. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.



The form includes an "Add Hours" button and a table for recording hours.

Crew #	Date	Start	End	Hours	Action
* 1	* [Date Picker]	* HHMM	* HHMM		Del
* 1	* [Date Picker]	* HHMM	* HHMM		Del

STEP 17: Select the Add Comment button to add a line to document any significant events. Enter the Date, Time and comment. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

Add Comment

Date	Time	Comment	Action
*	*	*	
<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">HHMM</div>	<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>	Del

STEP 18: Select yes or no for Loss/Damage and enter any Supply Numbers issued by the incident. Select the Save and Next button on the top right or use the left-hand navigation to move to the next box.

15. LOSS/DAMAGE

☐ Yes
 ☐ No

After you have completed your F-42 submission, you will need to submit an Expense Claim Reimbursement Form in order to process this F-42 completely.

16. SUPPLY NUMBER

STEP 19: Complete the required responding personnel fields and sign the form. Users can also attach a copy of any additional documentation that is relevant to their reimbursement. Select the save and next button on the top right and the system will check the form for missing information and then open box 18 to be signed by the authorized incident personnel.

*** AGENCY NAME**

Gov's Office of Emergency Services

*** YOUR NAME**

*** YOUR PHONE NUMBER**

*** YOUR TITLE**

*** Signature of Responding Agency Personnel**

Reset

Attach File

↑
Upload Files
Or drop files

Attachment Name	Action

STEP 20: Authorized incident personnel can use the summary to review all information entered in the F-42. At the bottom of the page, the authorized incident personnel should complete the required fields. If a Cal OES AREP is assigned to the incident, they should complete that section.

PAYING AGENCY

☐ CAL OES ☐ CAL FIRE ☐ USFS ☐ BLM
☐ NPS ☐ BIA ☐ FWS ☐ LRA/MMA ☐ OTHER

Clear

***PRINTED NAME**

***DATE**

***Signature of Authorized Incident Personnel**

***ICS POSITION / TITLE**

Reset

Cal OES REPRESENTATIVE (if assigned)

DATE

STEP 21: Select the Submit button in the top right corner. A pop up will appear to verify the user is ready to submit. The pop up also allows for two email addresses to be entered to email a finalized PDF copy of the F-42 upon submission.

Submit

Confirmation

NOTE: Once submitted you will not be able to make updates. If you have any corrections after submission please contact Cal OES at CFAAreimbursement@caloes.ca.gov or the Fire and Rescue Main Line at (916) 845-8711. Once you select submit, a copy of your F-42 will be electronically routed to Cal OES and your agency.

Email a Copy of the Completed F-42

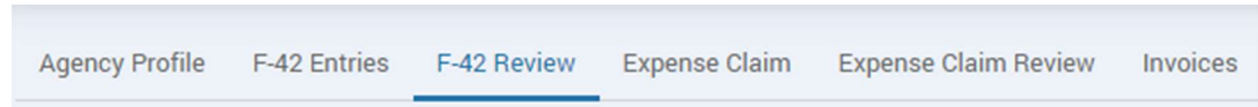
Authorized Incident Personnel (Incident Finance) Email:

Responding Agency Personnel Email:

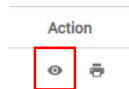
Cancel Submit

F-42 Review

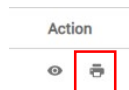
The F-42 Review screen allows Local Government Fire Agency users to view and print submitted F-42s. Secondary users will only have access to F-42s that have their name listed in box 12. Primary users will have access to all F-42s and will be able to communicate with Cal OES to provide missing information and further clarification for processing.



STEP 1: Select the eye icon under the Action header to view the F-42 submission. The form will appear below the F-42 table.



STEP 2: Select the printer icon under the Action header to print the F-42 submission. The form will open in a new tab.



STEP 3: Use the Status column to track the progress of an F-42.

Status	Description
Cal OES Review	F-42 has been submitted to Cal OES and is awaiting review before being generated into an invoice.
Agency Review	F-42 has been reviewed by Cal OES and returned to the local agency for additional information or clarification.
Approved	F-42 has been reviewed and is awaiting invoice generation.
Documentation Only	F-42 was marked as not reimbursable and will not be generated into an invoice.

STEP 4: Any F-42s in Agency Review status are requiring information from the local agency. To provide the required information, select the eye icon to view the F-42 and scroll to the bottom of the page. View the Comments from Mutual Aid Staff and use the Local Agency Primary User Comments and/or the Upload Files button to provide the requested information. Select the Submit button to send it back to Cal OES.

COMMENTS FROM MUTUAL AID STAFF

File Name	Action
OES-OVERHEAD-0-52.2.pdf	

*LOCAL AGENCY PRIMARY USER COMMENTS

Attach File

Upload Files Or drop files

Expense Claim Submissions

All users can enter electronic Expense Claims for travel expenses that are associated with a resource that was ordered under the CFAA. Primary Users have permission to view submitted Expense Claims and communicate with Cal OES to provide clarification or missing information to help the reimbursement progress.

[Agency Profile](#) [F-42 Entries](#) [F-42 Review](#) [Expense Claim](#) [Expense Claim Review](#) [Invoices](#)

Expense Claim Entries

The expense claim tab allows Local Government Fire Agency users to complete, save and submit expense claim reimbursement forms for processing.

STEP 1: Select the Add New Expense Claim button on the bottom right-hand corner of the screen to open a new form.

Add New Expense Claim

STEP 2: Use the select incident field to find the appropriate incident and complete the incident order number.

*Select Incident

Incident Order Number

STEP 3: Once an incident is selected, a table will populate with F-42s that have been submitted by your agency for the chosen incident. Associate the expense claim with the correct resource by choosing the F-42 from the table. If the F-42 does not appear, select the checkbox under the search incident field and Cal OES will match the F-42s after submission.

F42 Name	Strike Team	Incident Request Number	Unit Number
<input checked="" type="radio"/> OES-OVERHEAD-O-27	OVERHEAD	O-27	
<input type="radio"/> OES-SINGLE RESOURCE-E-100	SINGLE RESOURCE	E-100	E-123
<input type="radio"/> OES-SINGLE RESOURCE-E-200	SINGLE RESOURCE	E-200	E-2605

or

☒ Select if expense claim is not associated with an existing F-42

STEP 4: Select the Add Row button in the top right corner to enter a line for each day expenses are being claimed.

Add Row

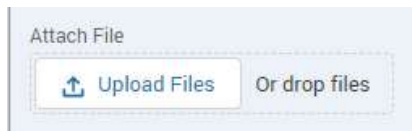
STEP 5: Complete the date the purchase was made, the city where the purchase was made, the meal/lodging/miscellaneous costs, and a description.

Date	City	Meals	Lodging	MISC	Description	Total Amount	Action
<input type="text"/>	<input type="text"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sub Totals		\$0.00	\$0.00	\$0.00	Total	\$0.00	


STEP 6: Complete the comments field with any additional information.

Comments

STEP 7: Use the upload files button to attach supporting documentation to the expense claim such as receipts, approval, etc.



Attach File

 Upload Files Or drop files

STEP 8: Complete the required fields and sign the form.



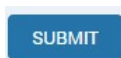
*PLEASE SIGN HERE

*Date

*Printed Name

Printed Name

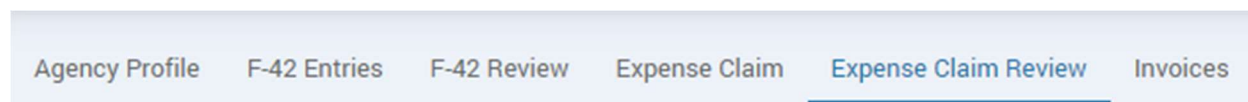
STEP 9: Select the Submit button in the bottom right corner.



SUBMIT

Expense Claim Review

The Expense Claim Review tab allows Local Government Fire Agency users to view submitted expense claim reimbursement forms. Primary users will have access to all expense claims and will be able to communicate with Cal OES to provide missing information and further clarification for processing.




Agency Profile F-42 Entries F-42 Review Expense Claim Expense Claim Review Invoices

STEP 1: Select the eye icon under the Action header to view the expense claim submission. The form will appear below the expense claim table.



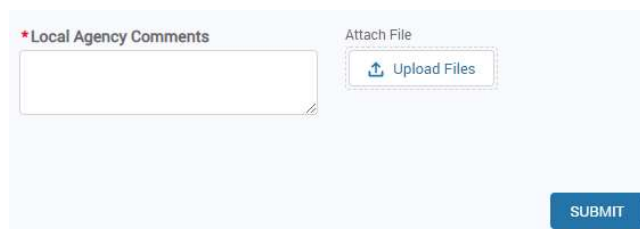
Action



STEP 2: Use the status column to track the progress of an expense claim.

Status	Description
Cal OES Review	Expense claim has been submitted to Cal OES and is awaiting review before being generated into an invoice.
Agency Review	Expense claim has been reviewed by Cal OES and returned to the local agency for additional information or clarification.
Approved	Expense claim has been reviewed and is awaiting invoice generation.
Documentation Only	Expense claim was marked as not reimbursable and will not be generated into an invoice.

STEP 3: Any expense claims in agency review status require additional information from the local agency. To provide the required information, select the eye icon to view the expense claim and scroll to the bottom of the page. View the Comments from Mutual Aid Staff and use the Local Agency Primary User Comments and/or the Upload Files button to provide the requested information. Select the Submit button to send it back to Cal OES.

A screenshot of a web form for 'Local Agency Comments'. It features a text input area with a small icon in the bottom right corner. To the right of the input area is a button labeled 'Upload Files' with an upward arrow icon. Above this button is the text 'Attach File'. At the bottom right of the form is a blue 'SUBMIT' button.

Invoices

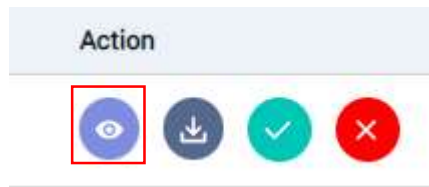
Primary Users have permission to view and manage CFAA reimbursement invoices that have been generated for their agency.

Invoices

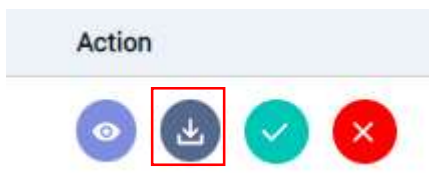
The Invoices tab allows Local Government Fire Agency users to view, approve, or reject invoices for their agency. Primary users will also be able to track the progress of invoice as they move through the payment process.



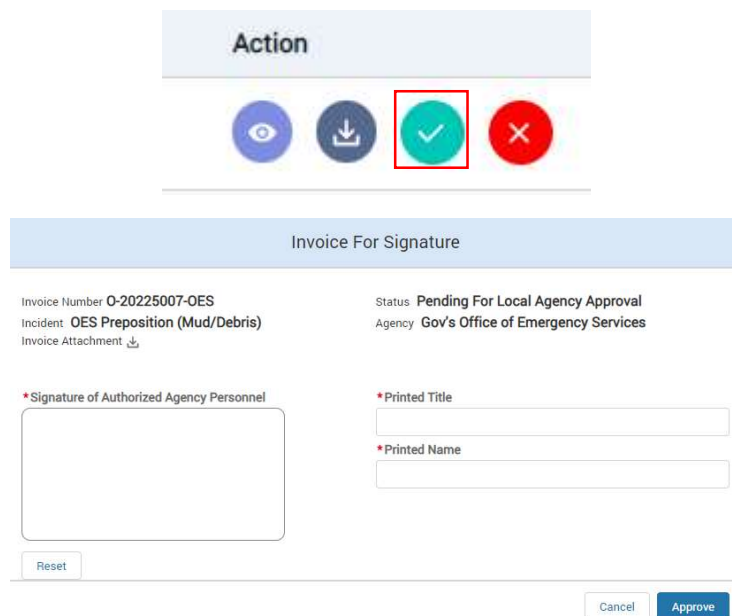

STEP 1: Select the eye icon under the Action header to view the invoice. The file will open in a separate tab.



STEP 2: Select the download icon under the Action header to view the invoice. The file will download onto your device.



STEP 3: Select the checkmark icon under the Action header to approve the invoice and send it back for payment. A pop up will appear requiring a signature, name, and title.

A screenshot of a form titled "Invoice For Signature" in a light blue header. The form contains the following information:
- Invoice Number: O-20225007-OES
- Incident: OES Preposition (Mud/Debris)
- Invoice Attachment: 
- Status: Pending For Local Agency Approval
- Agency: Gov's Office of Emergency Services
- *Signature of Authorized Agency Personnel: A large empty rectangular box.
- *Printed Title: An empty text input field.
- *Printed Name: An empty text input field.
At the bottom left is a "Reset" button. At the bottom right are "Cancel" and "Approve" buttons.

STEP 4: Select the X icon under the Action header to reject the invoice and send it back for correction. A pop up will appear requiring a comment explaining the needed corrections.

Action

Invoice Number **O-20225007-OES**

Incident **OES Preposition (Mud/Debris)**

Invoice Attachment

Status **Pending For Local Agency Approval**

Agency **Gov's Office of Emergency Services**

Rejection Document

Attach File

Upload Files

Or drop files

***Rejection Comments**

Cancel Reject

STEP 5: Use the status tables to track the progress of an invoice.

Status	Description
Pending For Local Agency Approval	Invoice has been generated and is awaiting approval or rejection from the local agency.
Local Agency Rejected	Invoice has been rejected by the local agency and is pending review and/or correction by Cal OES.
Local Agency Approved	Invoice has been approved by the local agency and will be sent to the paying entity by Cal OES.
Pending for Paying Entity Approval	Invoice has been sent to the paying entity for review and is pending payment.
Paid	Invoice has been paid.
Documentation Only	Invoice was marked as not reimbursable and will not be paid.